

DIFFERENCES BETWEEN STROKE AND STEMI CENTER LEVELS

For Discussion 4/7/09

Level and Criteria	STEMI	Stroke
Level I Center		
1. Emergency Department (ED)	<ul style="list-style-type: none"> May be by-passed to go directly to cardiac catheterization lab 24/7 in-house (IH)ED physician 	<ul style="list-style-type: none"> May be by-passed to go directly to IR 24/7 in-house (IH)ED physician
2. Intensive Care Unit	<ul style="list-style-type: none"> With Cardiology expertise and support for further advanced treatment Equipment 	<ul style="list-style-type: none"> With stroke/neurology expertise and support for further advance treatment Equipment
3. Specialized Care	<ul style="list-style-type: none"> L-VAD with advance support 24/7 Cardiac Artery Bypass Graft promptly available 24/7 Cardiac catheterization lab, angiography and interventional capabilities from time of notification Available consultation services for region 	<ul style="list-style-type: none"> 24/7 Neurointerventional capability/angiography/IR (PA) 24/7 NS6/vascular surgery coverage (PA) 24/7 Diagnostic Radiology (CT/MRI) Available consultations services for region
4. Surgery	<ul style="list-style-type: none"> Cardiac surgery back up 24/7 	<ul style="list-style-type: none"> Neurosurgery; vascular surgery; endovascular experts
5. Inpatient beds	X	X
6. Rehabilitation -available on campus with protocol for how managed	X	X
7. Higher volumes of care	400 Elective PCI/year	
	>49 Primary PCIs	
8. Performance Expectations - Time parameters for delivery of time critical procedures	X	X
9. Personnel - Advanced training and certifications to support specialized services	X	X
10. Helipad	X	X
11. Equipment - Appropriate for advanced level of care	X	X
12. Policy		
<ul style="list-style-type: none"> Accept all stroke and STEMI transfers 	X	X
<ul style="list-style-type: none"> One call access to activate transfer 	X	X
<ul style="list-style-type: none"> One-call access for activation of specialized services 	X	X
<ul style="list-style-type: none"> Make arrangements for repatriation to community hospital, if indicated 	X	X

Missouri Department of Health and Senior Services

IH-in house, IA-Immediately available (within 20 min. notification of TCD patient), PA-Promptly available (within 30 minutes)

3/23/09

Differences between Levels of STEMI and Stroke Centers

Level and Criteria	STEMI	Stroke
Level II Center		
1. Emergency Department	May be by-passed to go directly to cardiac catheterization lab 24/7 in-house (IH)ED physician	May be by-passed to go directly to IR 24/7 in-house (IH)ED physician
2. Intensive Care Unit	X	X
3. Specialized Care	24/7 Cardiac catheterization lab, angiography and interventional capabilities, PA	24/7 neuro IR/angio (PA) 24/7 Diagnostic Radiology (CT/MRI)
4. Inpatient beds	X	X
5. Rehabilitation -available on campus with protocol for how managed	X	X
6. Volumes of care	At least 200 Elective PCI/year >36 Primary PCIs	
7. Performance Expectations - Time parameters for delivery of time critical procedures	X	X
8. Personnel - Advanced training and certifications to support specialized services	X	X
9. Helipad	X	X
10. Equipment - Appropriate for advanced level of care	X	X
11. Policy		
• Accept all stroke and STEMI transfers	X	X
• One call access to activate transfer	X	X
• One-call access for activation of specialized services	X	X
• Make arrangements for repatriation to community hospital, if indicated	X	X

Differences from Level I

- No surgery back-up requirement
- Fewer specialized care requirements
- Lower PCI volumes
- No research requirement

Differences between Levels of STEMI and Stroke Centers

Level and Criteria	STEMI	Stroke
Level III Center		
1. Emergency Department	24/7 in-house (IH)physician	24/7 in-house (IH)physician
2. Intensive Care Unit	X	
3. Specialized Care	<ul style="list-style-type: none"> • Administer lytics and stabilize • Transfer patients not improving within 30 minutes of lytics. May keep those patients that are improving. 	Drip and ship
4. Inpatient beds	X	X
5. Performance Expectations- Time parameters for delivery of time critical procedures	X	X
6. Personnel- training and certifications to support specialized services	X	X
7. Helipad	X	X
8. Equipment- Appropriate for level of care	X	X
9. Policy		
<ul style="list-style-type: none"> • One call access to activate transfer 	X	X
<ul style="list-style-type: none"> • Accept all stroke and STEMI transfers 	X	X
<ul style="list-style-type: none"> • One call access to activate transfer 	X	X
<ul style="list-style-type: none"> • Make arrangements for repatriation to community hospital, if indicated 	X	

Differences from Level II

- Generally patient has entry through ER
- Administer lytics and stabilize for STEMI patients with potential to keep; transfer where warranted, not source for primary PCI on emergency basis

Differences between Levels of STEMI and Stroke Centers

Level and Criteria	STEMI	Stroke
Level IV Center		
1. Emergency Department	24/7 , IA physician	24/7, IA physician
2. Specialized Care	<ul style="list-style-type: none"> Stabilize life-threatening conditions when in proximity Drip and ship 	<ul style="list-style-type: none"> Stabilize life-threatening conditions when in proximity Triage and transfer
3. Personnel- training and certifications to support services	X	X
4. Equipment- Appropriate for level of care	X	X
5. Helicopter landing site	X	X
6. Performance Expectations- Time parameters for delivery of time critical procedures	X	X
7. Policy <ul style="list-style-type: none"> One call access to activate transfer 	X	X

Difference from Level III

- Services to support patient stabilization and rapid transfer to a higher level center.